Research review of college students' psychological quality

WANG Wei-ling, MIAO Dan-min

(Faculty of Aerospace Aviation Medicine, Fourth Military Medical University, Xi'an Shaanxi 710033, China)

Abstract: Quality education forms an important content of tertiary education reform and is at the same time a basic requirement for talent cultivation in the future society. Psychological education, one constituent of the said quality education, is of great significance for the overall development of college students. In recent years, some psychologists have carried out many valuable discussions on college students' psychological quality. This paper is thus composed as a review of researches done in the past decade on the current situation of college students' psychological quality and the factors that influence it.

Key words: college students; psychological quality; influence factors

In recent years, psychological workers have shown increasing interests in the psychological quality of college students and have carried out many valuable discussions on the issue. The significance of such researches lies in that they are conducive to acquiring a thorough knowledge of college students' psychological feature, which in turn helps to educate them according to their talents, to prevent them from unhealthy behaviors, and to bring out their physical and intellectual potentials. It is not only beneficial to students' development, but also provides a new educational form and approach for the colleges to turn out excellent talents. Meanwhile, it is also a rewarding experiment for psychology to serve society and practice, which will expand the application of the discipline. Therefore, this paper is given to a review of major researches on college students' psychological quality done in the past decade or so.

1. The Concept of Psychological Quality

Psychological quality is concept of very inclusive connotations, which has no unified definition up to now. Generally speaking, psychological quality covers the entire research area of psychology. A widely accepted view is that it refers to the total sum of psychological qualities an individual develops on the basis of born gifts and later education (including that of the family, society, and school and conscious and unconscious self-educations) and social practices. These psychological qualities include such contents as intellectual quality, emotional quality, quality of will, quality of personality, and psychological health levels etc. The said psychological health levels form the basic and core constituent of psychological quality that influences students' growth (MIAO Yuan-jiang, 1998).

2. The Current Situation of College Students' Psychological Quality

WANG Wei-ling, Ph.D. candidate of Department of Psychology, Facullty of Aerospace Medicine, Fourth Military Medical University; research field: health psychology.

MIAO Dan-min, Ph.D., professor of Department of Psychology, Facullty of Aerospace Medicine, Fourth Military Medical University; research field: psychological measurement.

2.1 The condition of psychological health

Piko (Piko, et al, 1995) found that it had the prevalence of some common psychosomatic symptoms as a part of health state and health risk behaviors of a medical student population. In both sexes, backache and sleeping disorders were the most frequent symptoms. Furthermore, men reported stomach ache and palpitation in higher occurrence, while in women stress-related headache and chronic fatigue were the most common among the self-reported symptoms. The index of symptoms was significantly higher among women than men. Prevalence of psychosomatic symptoms proved an important variable affecting self-perceived health. The authors also suggested that health state of medical students were significantly better than students of other colleges (Piko, Barabas, & Boda, 1995). Holm (Holm, et al, 1997) reported that 16% of the students assessed themselves as severely mentally disordered and in need of treatment. This group showed objectively and clinically significant more frequent and more distinct psychological symptoms. Depressive syndromes, working disorders, anxieties and interpersonal conflicts were the dominant areas of complaints (Holm-Hadulla, & Soeder, 1997).

Physical and psychological well-being was associated with one's optimism, social support, and stress .Individuals who reported higher optimism and social support rated themselves higher with respect to physical and psychological well-being, regardless of their reported stress (Sumi, 1997) .The research findings also suggested that some chronic environmental stressors may increase the impact of acute social stressors ,and highlight the importance of examining contextual factors in the stress and health process. (Lepore, et al 1991). Maes (Maes, et al, 1997) found that psychological pressures was accompanied by an altered secretion of serum Igs , complement factors and some acute phase proteins (Maes, Hendriks, Van Gastel, et al, 1997).

Grace (1997) suggested that young people had been recognized as experiencing higher rates of morbidity, disability, and mortality from various developmental, environmental, and behavioral risk factors than the general population. These risk factors are so interrelated that successful efforts to change them require a more comprehensive approach that extends beyond the health of individuals to the wellness of an entire campus community. On the continuum of health and well-being, college health must move away from focusing on disease and move toward community wellness (Grace, 1997).

2.2 Various adjustment problems

Cherian (Cherian & Cherian, 1998), reported that between 33% and 85% of the first-year students experienced various adjustment problems (Cherian, & Cherian, 1998). About 30% of college students reported at least mild dysphoria. Depressed mood states were associated with dysfunctional attitudes and self-esteem problems. The freshmen reported the highest levels of dysphoria, problem-solving difficulties, and dysfunctional attitudes, but there appeared to be consistent, gradual improvements, such that by the senior year students reported significantly less dysphoria (Wong & Whitaker, 1993). Health status was generally lower for women than for men. Although there was a definite trend of worsening along all parameters of health and satisfaction during the year for both women and men, the most marked change was the increase in depressive symptoms. The students who were very satisfied with life had fewer symptoms of depression and anxiety; higher self-esteem, better physical, mental, and social health; stronger social ties; more physical activity; more sleep; and fewer stressful life events. Strong social ties were the factor most positively related to better health and life satisfaction (Parkerson, et al, 1990).

The multifaceted nature of problems foreign students face had led some researchers to conclude that these students tend to suffer from poor health during their overseas sojourn. Loneliness, tiredness, sadness and worrying were reported as a frequent source of problem by nearly one in four of students. Students reported a decline in

their general state of health as well as a rise in the occurrence of syndrome-like tendencies resembling paranoia, anxiety, depression and somatic complaints. These tendencies were attributed to certain psychosocial factors such as information received regarding study opportunities, social contacts with other tenants in the hall of residence and future job opportunities (Sam & Eide, 1991).

2.3 Sleeping problems

Psychological health is related to regular sleeping. Measures of health, well-being, and sleepiness are better related to sleep quality or sleep quantity. Average sleep quality was better related to health, affect balance, satisfaction with life, and feelings of tension, depression, anger, fatigue, and confusion than average sleep quantity. In addition, average sleep quality was better related to sleepiness than sleep quantity. Consequently, health care professionals should focus on sleep quality in addition to sleep quantity in their efforts to understand the role of sleep in daily life (Pilcher et al, 1997).

Pilcher and Walters (1997) Found that students who fell asleep in school reported higher negative mood states. Significant interactions were observed among sleepiness and age, sex, race, and duration of sleep. Specifically, younger men reported higher negative moods. Students who fell asleep in school consumed more alcoholic beverages and smoked more than those who did not. Perhaps falling asleep in school could be used as an index that characterizes students who manifest adaptive or psychological difficulty (Jean, 1998).

2.4 Substance abuse

Nystrom (Nystrom et al, 1994) found the mixed use of psychiatric drugs and alcohol with the aim of getting high, at least once, was reported by 3.6% of the female and 3.1% of the male students. However, only 1.0% had tried this mixed use more than once. Mixed users were more often smokers, heavy drinkers, or users of cannabis or heavy drugs. Male students tended to be mixed users because of anxiety, low self-esteem, and fears. Depression, stress, and sensation seeking were associated with mixed use in female students. Mixed use of psychiatric drugs and alcohol by young university students is still rare. There is a strong accumulation of other addictive behaviors among mixed users. Extra-personal reasons for mixed use were more prevalent among female students, and intra-personal reasons among male students (Nystrom, Perasalo, Salaspuro, et al, 1994).College students reported a higher percentage which had experienced sexual intercourse, but high school students reported a younger age of first sexual intercourse. High school students also initiated alcohol consumption at a younger age, although college students were more likely to binge drink. Regular cigarette use also was higher among college students, but was initiated at a younger age by high school students. Study results indicated that health education programs must begin much earlier than during the high school years. Due to early initiation of negative health behaviors, emphasis must be placed on abstinence and risk-reduction techniques for both populations (Wiley et al, 1997).

A situational factor that is commonly thought to influence substance use is stress. The tension reduction theory posits that alcohol relieves stress-reactions and that most people drink alcohol in stressful situations in order to relieve stress-reactions. But the research showed that the students' alcohol use decreased during the week before exams. This was due to the availability of effective alternatives for reducing anxiety (Noel & Cohen, 1997).

Students with a parental alcohol problem were also affected in their psychological health. These students are found to be inferior in their coping abilities, cognition competence and health status than those with no alcohol problem (Hall, 1997).

2.5 Suicide problems

Depression and suicidal ideation in college students were best predicted by hopelessness, while a history of attempted suicide was best predicated by helplessness (Lester, 1998). Survival and coping beliefs and hope rather

than hopelessness or other reasons for living were most related to suicide. Facilitating college students' hopefulness may bolster their survival and coping beliefs and discourage development of suicidal thoughts or actions (Range & Penton, 1994). Carris et al (1998) reported that family rigidity had an indirect effect on adolescent suicidal ideation through its effect on adolescent problem-solving deficits (Carris, Sheeber, & Howe, 1998).

Through the researches on Oxford student suicide cases during a period of 14 years (from 1976 to 1990), Hawton et al (1995) found that the rate of attempted suicide during university term-time was lower than in other young people of similar age in Oxford City. The difference was particularly marked in females. The lower rate in the students may in part reflect their generally higher socio-economic status. Very few of the attempts by the students appeared to be failed suicides. The most frequent problems faced by the students at the time of their attempts were interpersonal, especially difficulties regarding partners, followed by academic problems. The latter were usually problems with ongoing course work rather than with the Finals examinations. Approximately a quarter of the students had psychiatric problems, with personality disorders and depression being most common. At least 30% had a history of previous attempts (Hawton, Simkin, Fagg, et al, 1995). Hawton et al (1995) also reported that two-thirds of the students had been worried about academic achievement or their courses, as a result of which nearly half appeared to have had a psychiatric disorder (mostly depression).

3. Factors That Affect College Students' Psychological Quality

One's psychological quality is subject to the influence of various factors, which can be categorized into the following groups:

3.1 Biological factors

Recent researches showed that the mother's mood during pregnancy and the childbirth condition may also influence children's postnatal psychological health. When the mother was under emotional actions, the autonomic nervous system activated the endocrine gland, allowing the secreted hormone to directly infuse into the blood, which caused the mother to show many features that were invisible under the state of emotional actions. Meanwhile, the hormone could be passed on to the fetus, causing corresponding emotional features to the fetus. According to the findings of tracing researches, emotional disturbance during the mother's pregnancy would lead to frequent autonomic movement to the fetus and more difficulties in coping with the environment compared with other babies after birth. Generally, these babies stir, eat, spit and cry more and were dysphoria, which may last for long. Other researches showed that premature babies and babies anoxic at birth were more liable to emotional and intellectual problems.

3.2 Gender differences

There were many differences between men and women. Sex differences were found in sense of coherence, hardiness, personality, and psychological well-being. As to self-esteem, however, no apparent difference was found between men and women (Gibson & Cook, 1997). Men and women were also different from each other in anxiety sensitivity. Generally, it was thought that anxiety sensitivity was mainly related to the three factors of physical, psychological and social consequences of anxiety, with the physical concerns factor being the dominating factor to women and the social and psychological concerns factors the dominant factors of men (Stewart et al, 1997). It was reported that women preferred to express the unbearable pressures more than men do. Gender difference was also found in the anger expression with women more apt to choose such approaches as

discussions and expressions (Campbell et al, 1992). Females reported higher levels of depressive symptoms and neuroticism than did males, and were more likely to have a lifetime history of episodes of dysphoria, males were more susceptible to the adverse effects of early childhood loss (Hong et al, 1993).

3.3 Family factors

Family environment was an important factor that affected college students' psychological qualities. Within the family environment, parents' attitude towards children was the most crucial factor. Erikson pointed out that children without parental care but negligence, abandonment and hostility would grow up with distrust in others, in their surroundings and in themselves especially. They would suffer from continuous anxiety and fluctuating tempers, which would lead to neurosis personalities.

Russek and Schwartz (1997) found that the perception of parental love and caring may have important effects on biological and psychological health and illness throughout life. Students identified in midlife as suffering from illnesses such as coronary artery disease, hypertension, duodenal ulcer, and alcoholism, gave their parents significantly lower ratings on perceived parental caring items while in college. This effect was independent of student's age, family history of illness, smoking behavior, the death and/or divorce of parents, and marital history of subjects. Furthermore, 87% of students who rated both their mothers and fathers low in parental caring had diagnosed diseases in midlife, whereas only 25% of subjects who rated both their mothers and fathers high in parental caring had diagnosed diseases in midlife. Since parents are usually the most meaningful source of social support for much of early life, the perception of parental caring, and parental loving itself, may have important regulatory and predictive effects on biological and psychological health and illness (Russek, & Schwartz, 1997a;1997b).

Joubert (1991) showed that college students with higher scores in self-esteem reported that their parents were fairer, had more interest in their activities, used praise more often, and refrained from verbal abuse. Students who reported their parents as being stricter had lower self-esteem scores. The parents' child-rearing styles also influenced children's behavior in such aspects as personality, adjustment, academic achievement and substance abuse.

3.4 Racial differences

Differences in cultural and racial backgrounds also lead to different characteristics in psychological qualities.

Gerdes and Ping (1994) found that American students reported more interference with academic activities as a result of stress; Chinese students reported more interference with personal development. American students reported a greater occurrence of stressful life events and higher stressfulness of these events. American students also reported less problem-focused coping than Chinese students (Gerdes & Ping, 1994). Stevens et al (1993) showed that Chinese men appeared more socially introverted than Caucasian men. Relative to Caucasian women, Chinese women were more defensive, depressed, unaware of somatic and psychosocial problems (Stevens, Kwan, & Graybill, 1993).

Kim et al (1997) reported that compared to the Japanese and Korean students, Chinese students had a multitude of stressors and experienced the highest level of stress. In coping with stressful events, Koreans were the most active, Chinese the least active and Japanese were intermediately active. Physical symptoms were found to be most serious in Koreans and less serious in Chinese and Japanese (Kim, Won, Liu, et al, 1997).

3.5 Social factors

Social changes, life rhythms and social ethos were also factors not negligible to the youths' psychological health (Lepore, et al, 1991). While the sense of competition is strengthening in the society and the rhythms of life

are quickly gathering steps, people are gradually subject to graver pressures. According to statistics, people from developed countries have higher incidences of psychological obstacles than the third world, advanced regions than backward regions, and urban areas than rural areas. American futurist Williams says that social changes in the coming 30 years will be comparable in scale with those happened in the past 2 or 3 centuries. Some people feel difficult to adapt themselves to such changes, which leads to psychological crisis and maladjustment. Such situations have posed even greater challenges to the youths, demanding them to adapt themselves to social changes as well as their individual development.

References:

Campbell, R. L., Svenson, L. W., & Jarvis, G. K. (1992). Perceived level of stress among university undergraduate student in Edmonton, Canada. *Percept Mot Skills, 75* (2), 4-552.

Carris, M. J., Sheeber, L., & Howe, S. (1998). Family rigidity, adolescent problem-solving deficits, and suicidal ideation: A mediational model. *J Adolesc, 21*(4), 72-459.

Cherian, V. I. & Cherian, L. (1998). University students' adjustment problems. *Psychol Rep, 82* (3 Pt 2), 8-1135.

Gerdes, E. P & Ping, G. (1994). Coping differences between college women and men in China and the United States. *Genet Soc Gen Psychol Monogr, 120* (2), 98-169.

Gibson, L. M. & Cook, M. J. (1997). Do health questionnaires which do not consider sex differences miss important information? *Psychol Rep, 81* (1), 71-163.

Grace, T. W. (1997). Health problems of college students. *J AM Coll Health, 45* (6), 50-243.

Hall, A. E. (1997). Coping resources and self-perceived well-being of college students who report a parental drinking problem. *J AM Coll Health, 45* (4), 64-159.

Hawton, K., Haigh, R., Simkin, S., et al. (1995). Attempted suicide in Oxford University students, 1976-1990. *Psycho Med, 25* (1), 88-179.

Hawton, K., Simkin, S., Fagg, J., et al. (1995). Suicide in Oxford University students, 1976-1990. *Br J Psychiatry, 166* (1), 44-50.

Holm-Hadulla, R. & Soeder, U. (1997). Psychological complaints and disorders of students. *Psychother Psychosom Med Psychol, 47* (12), 25-419.

Hong, S. M., Faedda, S., & Zacharia, M. (1993). Are university students more depressed than nonuniversity students? *Psychol Rep, 72* (3 pt1), 4-991.

Jean-Louis, G., Von Gizycki, H., Zizi, F., et al. (1998). Mood states and sleepiness in college students: Influences of age, sex, habitual sleep, and substance use. *Percept Mot Skills, 87* (2), 12-507.

Joubert, C. E. (1991). Self-esteem and social desirability in relation to college students' retrospective perceptions of parental fairness and disciplinary practices. *Psychol Rep, 69* (1), 20-115.

Kim, K. I., Won, H., Liu, X., et al. (1997). Students' stress in China, Japan and Korea: A transcultural study. *Int J Soc Psychiatry, 43* (2), 87-94.

Lepore, S. J., Evans, G. W., Palsane, M. N., et al. (1991). Social hassles and psychological health in the context of chronic crowding. *J Health Soc Behav, 32* (4), 67-357.

Lester, D. (1998). Helplessness, hopelessness, and haplessness and suicidality. *Psychol Rep, 82* (3 Pt 1), 946.

Maes, M., Hendriks, D., Van Gastel, A., et al. (1997). Effects of psychological stress on serum immunoglobulin, complement and acute phase protein concentrations in normal volunteers. *Psychoneuroendocrinology*. *22* (6), 397-409.

MIAO Yuan-jiang. (1998). Measurement and moral education measure counter of psychological qualities in medical students. *Medicine and Philosophy, 19* (10), 4-552 (in Chinese).

Noel, N. E. & Cohen, D. J. (1997). Changes in substance use during times of stress: College students the week before exams. *J Drug Educ, 27* (4), 72-363.

Nystrom, M., Perasalo, J., Salaspuro, M., et al. (1994). Mixed use of psychiatric drugs and alcohol by Finnish university students participating in a health screening. *Scand J Prim Health Care, 12* (4), 80-276.

Parkerson, G. R. Jr, Broadhead, W. E. & Tse, C. K. (1990). The health status and life satisfaction of first-year medical students. *Acad Med, 65* (9), 8-586.

(to be continued on Page 67)